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APPLICANTS Michael V. Chobotov, Santa Rosa, CA; Brian Glynn, Santa Rosa, CA; Stuart Kari, Windsor, CA; Maurice Marthaler, Santa Rosa, CA; Robert Whirley, Santa Rosa, CA; Isaac Zacharias, Santa Rosa, CA;				
** CONTINUING DATA ***** ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/05/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 15	TOTAL CLAIMS 71
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TITLE Radially expandable stent				
FILING FEE RECEIVED 1829	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	